PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

| Effective December 8, 2004 | | | | | | | | 10/ 577, 487. | | | | |
|--|--|---|--|-------------------------------|--------------------------|----------------------------------|---------|---------------------|------------------------|----------------------------|---------------------|------------------------|
| CLAIMS AS FILED - PA | | | | | | | | SMALL ENTITY TYPE | | OTHER THAN OR SMALL ENTITY | | |
| U.S. | NATIONAL S | STAGE FEES | | | | | 1 | RATE | FEE | | RATE | FEE |
| BAS | C FEE | | | | | | 1 | BASIC FEE | | OR | BASIC FEE | 300 |
| EXA | MINATION FE | E | | | | | 1 | EXAM. FEE | | | EXAM. FEE | 200 |
| SEARCH FEE | | | | | | | | SEARCH FEE | | | SEARCH FEE | 400 |
| FEE FOR EXTRA SPEC. PGS. | | | mint | ıs 100 = | | / 50 = | | X \$ 125 = | | | X \$ 250 = | |
| TOTAL CHARGEABLE CLAIMS | | | 3 mir | nus 20 = | * | | | X \$ 25 = | | OR | X \$ 50 = | |
| INDE | PENDENT CL | AIMS | ı m | inus 3 = | * | | | X \$ 100 = | | OR | X \$ 200 = | |
| MUL | TIPLE DEPENI | DENT CLAIM PRI | ESENT | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | TOTAL | · | OR | TOTAL | 900 |
| | CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | SMALLE | NTITY | OR | OTHER T | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | 1 | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | | = | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT | | | | CLAIM | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | - . | | | 1 | - 1 | TOTAL ADDIT. FFF | | OR | TOTAL ADDIT. FFF | |
| | | (Column 1) | | (Colur | | (Column 3) | | | | | | _ |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | ••••• | = | 1 | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| | <u> </u> | | | | | | | TOTAL ADDIT. FFF | | OR | TOTAL ADDIT. | |
| * ** | If the "Highest No | umn 1 is less than th umber Previously Pa umber Previously Pak mber Previously Pak | id For" IN THIS SI id For" IN THIS SI | PACE is les PACE is les | s than '20 s than '3' | 0', enter "20". ', enter "3". | d in th | e appropriate box | cin column | 1. | | |